

FORM
5

Rev
02/20

State of Colorado Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 894-2109



Document Number:

402370690

Date Received:

DRILLING COMPLETION REPORT

Per Rule 308A, this form and all required attachments shall be submitted after completing the drilling operations to drill, sidetrack, or deepen a wellbore and after changing the casing and/or cement configuration of a wellbore. If any attempt has been made to test, complete, or produce the well, the operator shall also submit a Form 5A (Completed Interval Report) per Rule 308B. If the well has been plugged, the operator shall also submit a Form 6 (Well Abandonment Report) per Rule 311.

Completion Type Final completion Preliminary completion

OGCC Operator Number: 10110 Contact Name: Miracle Pfister
Name of Operator: GREAT WESTERN OPERATING COMPANY LLC Phone: (720) 595-2250
Address: 1001 17TH STREET #2000 Fax: _____
City: DENVER State: CO Zip: 80202 Email: regulatorypermitting@gwp.com

API Number 05-123-36594-00 County: WELD
Well Name: Land JG Well Number: 31-24D
Location: QtrQtr: SWSW Section: 31 Township: 2N Range: 64W Meridian: 6
FNL/FSL _____ FEL/FWL _____
Footage at surface: Distance: 248 feet Direction: FSL Distance: 929 feet Direction: FWL
As Drilled Latitude: 40.088158 As Drilled Longitude: -104.599356
GPS Data: GPS Quality Value: 1.6 Type of GPS Quality Value: PDOP Date of Measurement: 03/17/2016
GPS Instrument Operator's Name: DARREN SHANKS
FNL/FSL _____ FEL/FWL _____
** If directional footage at Top of Prod. Zone Dist: 679 feet Direction: FSL Dist: 1831 feet Direction: FWL
Sec: 31 Twp: 2N Rng: 64W
FNL/FSL _____ FEL/FWL _____
** If directional footage at Bottom Hole Dist: 679 feet Direction: FSL Dist: 1842 feet Direction: FWL
Sec: 31 Twp: 2N Rng: 64W
Field Name: WATTENBERG Field Number: 90750
Federal, Indian or State Lease Number: _____

Spud Date: (when the 1st bit hit the dirt) 02/21/2013 Date TD: 02/25/2013 Date Casing Set or D&A: 02/27/2013
Rig Release Date: 03/26/2013 Per Rule 308A.b.

Well Classification:

Dry Oil Gas/Coalbed Disposal Stratigraphic Enhanced Recovery Storage Observation

Total Depth MD 7433 TVD** 7315 Plug Back Total Depth MD 7389 TVD** 7273

Elevations GR 4933 KB 4947 Digital Copies of ALL Logs must be Attached per Rule 308A

List Electric Logs Run:

CBL, Composite

CASING, LINER AND CEMENT

Casing Type	Size of Hole	Size of Casing	Wt/Ft	Csg/Liner Top	Setting Depth	Sacks Cmt	Cmt Top	Cmt Bot	Status
SURF	12+1/4	8+5/8	24	0	1,025	670	0	1,025	VISU
1ST	7+7/8	5+1/2	11.6	0	7,402	570	2,528	7,402	CBL

STAGE/TOP OUT/REMEDIAL CEMENT

Cement work date: _____

Method used	String	Cementing tool setting/perf depth	Cement volume	Cement top	Cement bottom

Details of work:

FORMATION LOG INTERVALS AND TEST ZONES

FORMATION NAME	Measured Depth		Check if applies		COMMENTS (All DST and Core Analysis must be submitted to COGCC)
	Top	Bottom	DST	Cored	
PARKMAN	4,153	4,275	NO	NO	
SUSSEX	4,638	4,744	NO	NO	
SHANNON	5,282	5,363	NO	NO	
SHARON SPRINGS	6,830		NO	NO	
NIOBRARA	6,939		NO	NO	
FORT HAYS	7,246		NO	NO	
CODELL	7,268		NO	NO	
CARLILE	7,283		NO	NO	
GREENHORN	7,334		NO	NO	

Operator Comments:

Form 2 was approved with SHL permitted as Lot 2. This is incorrect - Lot 2 is greater than 40 acres. SHL has been updated to SWSW.

The attached logs were already submitted in 2013 in .tif format. They have been resubmitted on this Form 5 in PDF and LAS. LAS CBL was uploaded to provide the missing portion of gamma ray on the Composite log.

Cement Job Summary incorrectly reports surface casing setting depth.
Composite log incorrectly reports surface casing setting depth.

I hereby certify all statements made in this form are, to the best of my knowledge, true, correct, and complete.

Signed: _____

Print Name: Jack Desmond

Title: Regulatory Permitting

Date: _____

Email: jdesmond@gwp.com

Attachment Check List

Att Doc Num	Document Name	attached ?	
Attachment Checklist			
402430991	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
402430987	Directional Survey **	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	DST Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
	Logs	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Other	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
Other Attachments			
402430986	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402475359	LAS-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402475360	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402475664	PDF-COMPOSITE	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
402475666	LAS-COMPOSITE	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
		Stamp Upon Approval

Total: 0 comment(s)

